



Commissioner for Patents  
Washington, DC 20231  
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Bib Data Sheet

CONFIRMATION NO. 3673

<b>SERIAL NUMBER</b> 10/046,651	<b>FILING DATE</b> 10/19/2001 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1644	<b>ATTORNEY DOCKET NO.</b> P-HR 5213
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**APPLICANTS**  
Terry J. Smith, Manhattan Beach, CA;  
William W. Cruikshank, Westford, MA;

**\*\* CONTINUING DATA \*\*\*\*\***  
This application is a CON of 09/684,601 10/06/2000 ABN *PN*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
*NONE - PN*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY \*\***  
**\*\* 02/28/2002**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 4	<b>INDEPENDENT CLAIMS</b> 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>P. No. 2</i>				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

**ADDRESS**  
22249

**TITLE**  
Detection of antibody mediated inflammatory auto-immune disorders

<b>FILING FEE RECEIVED</b> 435	<b>FEES: Authority has been given in Paper</b> No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit